

PART B - FEE(S) TRANSMITTAL

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7590

09/22/2008

Hamre, Schumann, Mueller & Larson, P.C.
P.O. Box 2902-0902
Minneapolis, MN 55402

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Mele Cauffman (Depositor's name)
Mele Cauffman (Signature)
November 19, 2008 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/529,536	03/29/2005	Yasuhito Yuasa	10873.1640USWO	4552

TITLE OF INVENTION: TWO-COMPONENT DEVELOPER HAVING A RESIN COATED CARRIER FOR ELECTROPHOTOGRAPHY AND TONER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440- \$1510	\$300	\$0	\$1740	12/22/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS				
RODEE, CHRISTOPHER D	1795	430-109400	01 FC:1501 02 FC:1504	1510.00 DA 300.00 DA		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Hamre, Schumann,

2 Mueller & Larson, P.C

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Panasonic Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Osaka, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies

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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3478 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date November 19, 2008

Typed or printed name James A. Larson

Registration No. 40,443

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**HAMRE, SCHUMANN,
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FAX TRANSMISSION November 19, 2008

TO: Mail Stop: ISSUE FEE
 Examiner: C. RODEE
 Commissioner for Patents
 PO Box 1450
 Alexandria, VA 22313-1450

FROM: James A. Larson

OUR REF: 10873.1640USWO

TELEPHONE: (612) 455.3800

Total pages, including cover letter: 2

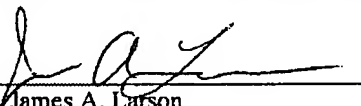
PTO FAX NUMBER: 571.273.2885

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Title of Document: **Part B – Fees Transmittal (PTOL-85)**

Applicant: YUASA et al.
Serial No.: 10/529,536
App. Filed: March 29, 2005
Group Art No.: 1795
Con. No.: 4552

Please charge Deposit Account No. 50-3478 in the amount of \$1510 for payment of Issue Fee and \$300 for payment of Publication Fee. Please charge any additional fees or credit overpayment to Deposit Account No. 50-3478. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

By: 
Name: James A. Larson
Reg. No.: 40,443

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Mele Cauffman


Signature

November 19 2008
Date

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